

County of San Diego Monthly STD Report

Issue No. 52: Data through April 30, 2013; Report released July 31, 2013.



Table 1. STDs reported among San Diego County residents, by month (April 2013) and year-to-date 2012

(April 2013) and year-to-date.	20	12	2013		
	Apr	YTD	Apr	YTD	
Chlamydia	1311	5575	1397	5378	
Female age 18-25	595	2396	616	2313	
Female age ≤17	66	246	75	317	
Male rectal chlamydia	51	169	28	173	
Gonorrhea	195	827	259	944	
Female age 18-25	36	159	30	150	
Female age ≤ 17	3	15	3	17	
Male rectal gonorrhea	36	124	24	127	
Early Syphilis (adult total)	45	167	43	192	
Primary	8	41	7	41	
Secondary	16	64	18	80	
Early latent	21	62	18	71	
Neurosyphilis*	2	6	0	1	
Congenital syphilis	2	2	1	2	
HIV Infection**					
HIV (not AIDS)	54	164	34	154	
AIDS	20	102	27	109	

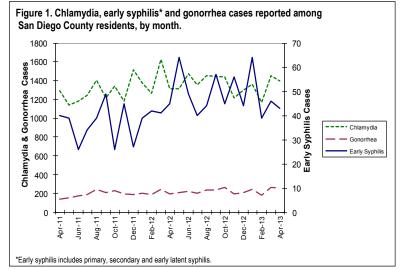


Table 2. Selected STD cases and annualized rates per 100,000 population for San Diego County, by age and race/ethnicity, year-to-date, 2013.

	All races*		Asian/PI		Black		Hispanic		White	
	cases	rate	cases	rate	cases	rate	cases	rate	cases	rate
All ages										
Chlamydia	5378	513.3	177	149.2	377	811.4	1291	374.1	863	173.5
Gonorrhea	944	90.1	38	32.0	86	185.1	167	48.4	218	43.8
Early syphilis	192	18.3	12	10.1	12	25.8	70	20.3	93	18.7
Under 20 yrs										
Chlamydia	1101	391.6	29	103.8	124	989.5	327	257.8	148	154.1
Gonorrhea	85	8.1	0	0.0	19	151.6	15	11.8	9	9.4
Early syphilis	2	0.7	0	0.0	1	8.0	1	8.0	0	0.0

Note: Rates calculated using 2012 SANDAG population estimates.

Key Points comparing YTD cases reported through April 2012 to April 2013.

- Chlamydia has decreased 3.5%.
 - Female (<17) chlamydia has increased 28.9%.
- Gonorrhea has increased 14.1%.
 - Female (<17) gonorrhea has increased 13.3%.
- Early syphilis has increased 15.0%.

Note: All data are provisional. Case counts are based on the earliest of date of diagnosis, date of specimen collection and treatment date. Totals for past months might change because of delays in reporting from labs and providers.

Editorial Note: Update: Hepatitis B - Know Hepatitis B

Hepatitis B is a serious liver disease caused by the Hepatitis B Virus (HBV). Symptoms, when they occur, are similar to infection with Hepatitis A Virus and include abdominal pain, fatigue, fever, and dark urine. Most people fully recover from infection with HBV; however, for some people the infection is chronic. The risk of chronic infection is inversely proportional to age at infection: infants and young children are much more likely to become chronically infected than adults. Chronic infections can lead to liver failure, liver cancer or cirrhosis. Due to the nature of hepatitis B, which may be asymptomatic or mistaken for several other illnesses, cases, particularly of



acute hepatitis B, are likely underreported. In San Diego County in 2011, there were 20 reported cases of acute hepatitis B and 846 reported cases of chronic hepatitis B.

Risk factors associated with hepatitis B infection include unprotected sex with an infected partner, birth to an infected mother, unprotected sex with multiple partners, men who have sex with men, history of other STDs and injection drug use. While the method of transmission of HBV is the same as for HIV (i.e., exchange of blood, semen, other bodily fluids), HBV is 50-100 times more infectious than HIV.

Due to higher incidence of HBV in Asia and the Pacific Islands (excluding Australia and New Zealand), immigrants from these regions and their children have a higher risk of being infected at birth or as children. This population makes up less than 5% of the total U.S. population but accounts for more than 50% of the 1.2 million Americans estimated to be living with hepatitis B, with up to 2 out of 3 individuals unaware of their infection. The Centers for Disease Control and Prevention (CDC) recently launched a new hepatitis B communications campaign, Know Hepatitis B, to promote hepatitis B testing among Asian Americans and Pacific Islanders. For more information about this campaign, including professional and medical resources, as well as patient education materials available to download, please visit the campaign's website, www.cdc.gov/knowhepatitisb.

No cure for hepatitis B currently exists, but antiviral treatment may be used in some cases and a vaccine is available. The County of San Diego STD Clinics offer the dual hepatitis A and hepatitis B vaccination, Twinrix®. The vaccination course consists of three (3) doses given to at-risk clients over the course of six (6) months. For clinic locations and hours, visit www.STDSanDiego.org. For more information on hepatitis B vaccination, please read the CDC's Vaccine Information Statement.

Provider STD Reporting: (619) 692-8520; fax (619) 692-8541 STD Clinical Consultation Pager: (877) 217-1816 (8 a.m.-5 p.m., M-F, except major holidays) | STD Clinic: (619) 692-8550; fax (619) 692-8543

YTD: Year to Date

^{*}Includes confirmed and probable cases of neurosyphilis among cases of early syphilis only.

^{**}New infections are reported either as HIV or, if an individual was also diagnosed with AIDS within one month, as AIDS.

^{*}Includes cases denoted as "other" or "unknown" and for which no race/ethnicity data are specified.